CITY OF PARMA – DIVISION OF TAXATION

6611 RIDGE ROAD PARMA, OH 44129 MON - FRI 8:30 AM TO 4:30 PM PHONE: (440) 885-8045 - FAX: (440) 885-8044

XXXXXXXXXX

Reconciliation of Parma Income Tax WITHHELD From Wages Tax Year 2008

EMPLOYER'S FEDERAL ID#	PARMA ACCOUNT #			
	3. Total Parma Income Tax Withheld During Year (FORM PW-1)			
DO NOT FAIL TO FURNISH EMPLOYEE'S ADDRESS ON W2'S		Parma Employment Tax @2.5%	Parma Residence Tax	
1. Total number of employees as represented by	Quarter ended March 31	\$	\$	
Forms W-2 Submitted herewith	Quarter ended June 30	\$	\$	
Total gross employment Parma wages paid during this year. \$	Quarter ended September 30	\$	\$	
Total PARMA Income Tax withheld from	Quarter ended December 31	\$	\$	
wages during year shown by employee's statement (Form W-2) \$	4. TOTAL	\$	\$ (b)	
Please check type of withholding:	5. Grand Total {(4a) Total + (4b) T	(a) otal} \$	(b)	
Parma employment tax only Parma employment and residence tax	6. Difference between Lines 3 & 5 (Instructions Below)	\$		
Parma residence tax only If any of the above information is incorrect or has	*If Line 6 indicates a balance due, the amount thereof should accompany the return; if line 6 indicates an overpayment, it will be applied on the 2009 with holding tax unless the refund box below is checked and a signature provide			
changed, please correct below. I.E. (name change, fid# change, business closed, etc.)	REFUND		a signata s promos	
	Authorized Signature			
INSTRI	UCTIONS			

The original of this reconciliation form must be filed with the COMMISSIONER OF TAXATION, CITY OF PARMA, 6611 RIDGE RD., PARMA OH 44129, on or before January 31, 2009 unless written request for extension has been made to and granted (in writing) by the Commissioner. This form must be accompanied by copies of employee's statements (Form W2) or optional form showing: (1) name, address, and city of residence of employee: (2) social security number: (3) gross earnings paid before any payroll deductions: (4) amount of PARMA and other city income tax withheld: and (5) name, address and federal identification number (FID) of employer. An adding machine tape, listing the amount of Parma income tax withheld as indicated by the individual employee's statements, should be attached thereto.

RETURN THIS COPY WITH FORMS W2 AND ANY REQUIRED PAYMENT TO:

CITY OF PARMA - DIVISION OF TAXATION 6611 RIDGE ROAD PARMA, OH 44129

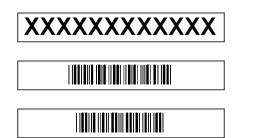
TAX DEPARTMENT COPY - TO BE FILED

CITY OF PARMA – DIVISION OF TAXATION

6611 RIDGE ROAD PARMA, OH 44129

EMDLOVED'S EEDEDAL ID#

MON - FRI 8:30 AM TO 4:30 PM PHONE: (440) 885-8045 - FAX: (440) 885-8044



Reconciliation of Parma Income Tax WITHHELD From Wages Tax Year 2008

DADMA ACCOUNT #

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Forms W-2 Submitted herewith	Quarter ended June 30	\$	\$	
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3. Total PARMA Income Tax withheld from	Quarter ended December 31	\$	\$	
wages during year shown by employee's statement (Form W-2) \$	4. TOTAL	\$	\$ (b)	
Please check type of withholding: Parma employment tax only Parma employment and residence tax Parma residence tax only If any of the above information is incorrect or has changed, please correct below. I.E. (name change, fid# change, business closed, etc.)	6. Difference between Lines 3 & 5 (Instructions Below) *If Line 6 indicates a balance due, return; if line 6 indicates an overpage.	(Instructions Below) \$ f Line 6 indicates a balance due, the amount thereof should accompany teturn; if line 6 indicates an overpayment, it will be applied on the 2009 with olding tax unless the refund box below is checked and a signature provid		
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